STATE OF SOUTH DAKOTA

DEC 3 1 2012

Statement of Legal Newspaper Ownership and Circulation STATE

Return to: Secretary of State, 500 I	E. Capitol, Pierre, SD 57501-5	077				
1. TITLE OF NEWSPAPER Vermillion Plain	Talk.	2. DATE 9-21-12				
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISHED ANNUALLY 3B. ANNUAL SUBSCRIPTION						
Weekly 52. PRICE \$ 26.00 4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)						
201 Cherra Street, Vermi	11ion SD 5706	9-0256				
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE	ERS OR GENERAL BUSINESS	OFFICES OF THE				
PUBLISHER (Not printers) 319 Walnut Street,						
		1018-0036				
7. OWNER (If owned by a corporation, its name and address must	st be stated and list on the back of	this form the names and				
addresses of stockholders owning or holding 1 percent or more	of total amount of stock. If not o	wned by a corporation, the				
names and addresses of the individual owners must be given. I	fowned by a partnership or other	unincorporated firm, its name				
and address, as well as that of each individual must be given. FULL NAME	COMPLETE MAI	I ING ADDRESS				
	100 NOT 100 NOT 100 NOT					
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I						
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M	ORTGAGES OR OTHER SECT	JRITIES (If there are none, so				
state. If more space is needed, list on back of this form.	0000000					
First Dakota National Bank	225 Cedar Street	+ Yaukton SD 57078				
	AVERAGE NO. COPIES	ACTUAL NO. COPIES				
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDING 12	ISSUED				
	MONTHS	NEAREST TO FILING DATE				
A.TOTAL NO. COPIES (Net Press Run)	1928	1964				
B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and						
counter sales.	589	631				
2. Mail Subscription	11					
(Paid and or requested)	1155	1148				
C.TOTAL PAID AND/OR REQUESTED CIRCULATION, (Sum of 9B1 and 9B2)	1742	15 = 0				
D.FREE DISTRIBUTION	1173	1779				
1. BY MAIL, CARRIER OR OTHER MEANS						
2. SAMPLES, COMPLIMENTARY AND OTHER FREE	o :					
COPIES						
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1743	1779				
F. COPIES NOT DISTRIBUTED	100					
1. Office use, left over, unaccounted, spoiled after printing	182	185				
2. Return from News Agents						
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1928	1964				
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public						
I swear that the statements made by me are true, correct, and complete:						
Hay Hoor Publisher						
(Title)						
	Sworn to before me this 27	Marine Sente Lien 12				
)	Swort to before me this of 1	day of Suptember 20 12				
County of Jankton) S Notary Public						
(Seal)	My commission expires: $8-19-2015$					

Form: SOS REC 051 7/2004

13. Publication	Title	· · · · · · · · · · · · · · · · · · ·		14. Issue Date for Circulation Data I	Below
Vermillion Plain Talk			9-21- 2012		
15. Extent and	Nati	ure of Circulation	; n	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Numbe	r of C	Copies (Net press run)		1928	1964
b. Paid Circulation (By Mail and Outside the Mail)	(1)	Mailed Outside-County Paid Subscriptions Stated on PS Form 3541(Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)		467	453
	(2)	Mailed In-County Paid Subscriptions Stated on PS Form 3541 (Include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	•	688	695
	(3)	Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Coun Sales, and Other Paid Distribution Outside USPS®	ter	588	631
	(4)	Paid Distribution by Other Classes of Mail Through the USPS (e.g. First-Class Mail®)			
c. Total Paid Di	stribu	tion (Sum of 15b (1), (2), (3), and (4))		1743	1779
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)	(1)	Free or Nominal Rate Outside-County Copies included on PS Form 3541	**		
	(2)	Free or Nominal Rate In-County Copies Included on PS Form 3541			
	(3)	Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g. First-Class Mail)	1		
	(4)	Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)	*		***
e. Total Free o	r No	minal Rate Distribution (Sum of 15d (1): (2), (3) and (4,))		
f. Total Distrib	ution	(Sum of 15c and 15e)	Þ	1743	1779
g. Copies not	Distri	buted (See Instructions to Publishers #4 (page #3))	. N	185	185
h. Total (Sum	of 15	f and g)	Þ	1928	1964
i. Percent Pa (15c divided		15f times 100)	Þ	100%	100%
☐ If the p	ublic	atement of Ownership ation is a general publication, publication of this statem issue of this publication.	en' is requ	ired. Will be printed	Publication not required.
17. Signature and Title of Editor, Publisher, Business Manager, or Owner August Mood Publisher Publisher				9/27/12	

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

UNITED STATES POSTAL SERVICE (All Periodicals Publications Except Requester Publications)						
1. Publication Title	2. Publication Number	3. Filing Date				
Vermillion Plain Talk	1657-720	09-21-12				
4. Issue Frequency	5. Number of Issues Published Annually	6. Annual Subscription Price				
7. Complete Mailing Address of Known Office of Publication (Not printer) (Street	52	\$ 26.00				
7. Complete Mailing Address of Known Office of Publication (Not printer) (Stre	et, city, county, state, and ZIP+489	David Jeffcoat				
0-11/01/01/11/11		Telephone (Include area code)				
201 W. Cherry Street, Vermillion 8. Complete Mailing Address of Headquarters or General Business Office of F	SD 57069	605-665-7811				
8. Complete Mailing Address of Headquarters or General Business Office of F	Publisher (Not printer)					
Yankton Media Inc. 319 Walnut	Street, Yankton S	0 57078-0056				
9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Man Publisher (Name and complete mailing address)	aging Editor (Do not leave blank)					
The interesting of the formal management of the control of the con	8					
Gara Wood 319 Walnut Street Editor (Name and complete mailing address)	Yankton SD 570	078-0056				
Editor (Name and complete mailing address)						
David Ligs 319 Walnut Street, Managing Editor (Name and complete mailing address)	Yankton SD 570	078-0056				
Managing Editor (Name and complete mailing address)						
David Lias 319 Walnut Street	Youlton SD 57	078-m56				
10. Owner (Do not leave blank. If the publication is owned by a corporation, g names and addresses of all stockholders owning or holding 1 percent or names and addresses of the individual owners. If owned by a partnership each individual owner. If the publication is published by a nonprofit organic	ive the name and address of the corporation fore of the total amount of stock. If not owne or other unincorporated firm, give its name a	immediately followed by the down to the do				
Full Name	Complete Mailing Address					
Yankton Media INC	319 Walnut St 4	2 Kton SD 52078				
Gary Wood and Deidre Wood	Same					
Gary Stevenson and Sue Stevenson	Same					
\circ \circ \circ						
Robert Hicks and Jennifer Hicks	Same					
*						
11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box	■ None					
Full Name	Complete Mailing Address					
EL DUL NILL D. D	1225 (1 (1 ()	ukton SD 57078				
First Dakota National Bank	dos Cecar St. Ya	ukton SU 3 10/8				
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		P. 1000				
12. Tax Status (For completion by nonprofit organizations authorized to mail a	and appropriate ration) (Charles and					
The purpose, function, and nonprofit status of this organization and the e		s:				
 ☐ Has Not Changed During Preceding 12 Months ☐ Has Changed During Preceding 12 Months (Publisher must submit e. 	volunation of change with this state———					